

ISSUE SLIP STAPLE AREA (for additional cross references)

7/1
11-2-CW

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION | SMC | | 10/11/00 |
| O.I.P.E. CLASSIFIER | 21 | 10/17/00 | |
| FORMALITY REVIEW | JC366 | 10/31/00 | |
| RESPONSE FORMALITY REVIEW | 675 | 04-12-21 | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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